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Approved for use through 09/30/2000. OMB 0651-0032  
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04/03/00

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	YOR000122US1 (8728-370)
First Inventor or Application Identifier	Bellamy et al.
Title	USER-DEFINED ONLINE INTERACTION METHOD...
Express Mail Label No.	EL433927527US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages (preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the invention
  - Brief Summary of the invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets - 4. Oath or Declaration [Total Pages - a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 16 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Copy
  - b. ☐ Paper Copy (identical to computer copy)
  - c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. § 3.73(b) Statement of Power of Attorney (when there is an assignee) ☐ Attorney
9. ☐ English Translation Document (if applicable)
10. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
13. ☐ Small Entity Statement(s) ☐ Statement filed in prior application, Status still proper and desired (PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
15. ☐ Other: \_\_\_\_\_

**\* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:  
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label \_\_\_\_\_ or ☐ Correspondence address below  
(Insert Customer No. or Attach bar code label here)

Name	Frank Chau				
Address	F. Chau & Associates, LLP 1900 Hempstead Turnpike, Suite 501				
City	East Meadow	State	New York	Zip Code	11554
Country	USA	Telephone	516-357-0091	Fax	516-357-0092

Name (Print/Type)	Frank Chau	Registration No. (Attorney/Agent)	34.136
Signature		Date	4/3/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Assistant Commissioner for Patents  
Washington, D.C. 20231  
Sir:

ATTORNEY DOCKET NO. 0000122US1 (8728-370)  
Date: April 3, 2000  
Express Mail Label: EL433927527US  
Date of Deposit: April 3, 2000

Transmitted herewith for filing is one Patent Application of:

Inventors: Rachel K. E. Bellamy, Jason Ellis, Thomas D. Erickson, Wendy A. Kellogg,  
Mark Laff, Peter K. Malkin, John T. Richards

For: USER-DEFINED ONLINE INTERACTION METHOD AND DEVICE

Enclosed are: [X] 30 sheets of specification; [X] 1 sheet(s) of Abstract; [X] 6 sheet(s) of claims; [X] 12 sheet(s) of drawing(s);

- [ ] An assignment of the invention to International Business Machines Corporation with Recordation Form.
- [ ] Declaration and Power of Attorney.
- [ ] A certified copy of a \_\_\_\_\_ application, from which priority under Title 35 USC §119 is claimed.
- [ ] Associate Power of Attorney.

The filing fee has been calculated as shown below:

(Col. 1) (Col. 2)

OTHER THAN A SMALL ENTITY

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	32 - 20 =	12
INDEP CLAIMS	3 - 3 =	0
___ MULTIPLE DEPENDENT CLAIMS PRESENTED		

RATE	FEE
	\$690.00
X \$18 =	216.00
X \$78 =	0
+ 260 =	
TOTAL	\$906.00

If the difference in Col. 1 is less than zero, enter "0" in Col. 2.

- [ ] A check in the amount of \$\_\_\_\_\_ to cover the [ ] filing fee(s), [ ] recording fee is enclosed.
- [X] Please charge my Deposit Account No. 50-0510/IBM (Yorktown Heights) in the amount of \$906.00.
- [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510/IBM (Yorktown Heights). A duplicate copy of this sheet is enclosed.
- [X] Any additional filing fees required under 37 CFR 1.16.
- [X] Any patent application processing fees under 35 CFR 1.17.

Respectfully submitted,

By:

Frank Chau  
Registration No. 34,136  
Attorney for:  
IBM Corporation  
Intellectual Property Law Dept.  
P.O. Box 218  
Yorktown Heights, NY 10598

Please address all  
correspondence to:  
F. CHAU & ASSOCIATES, LLP  
1900 Hempstead Tpke., Suite 501  
East Meadow, NY 11554  
Tel: (516) 357-0091  
Fax: (516) 357-0092

**CERTIFICATION UNDER 37 C.F.R. §1.10**

I hereby certify that this Application transmittal and documents referred to as enclosed are being deposited with the United States Postal Service on this date April 3, 2000 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EL433927527US addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Frank Chau



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# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ ) 906.00

## Complete if Known

Application Number  
Filing Date April 3, 2000  
First Named Inventor Bellamy et al.  
Examiner Name  
Group / Art Unit  
Attorney Docket No. YOR000122US1 (8728-370)

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 50-0510/IBM

Deposit Account Name IBM/Yorktown Heights

☒ Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:  
☐ Check ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 690	201 345	Utility filing fee	690
106 310	206 155	Design filing fee	
107 480	207 240	Plant filing fee	
108 690	208 345	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$ ) 690.00

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
32	20** = 12	18	216
Independent Claims 3	3** = 0	78	0
Multiple Dependent		260	

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 78	202 39	Independent claims in excess of 3
104 260	204 130	Multiple dependent claim, if not paid
109 78	209 39	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ ) 216.00

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 380	216 190	Extension for reply within second month	
117 870	217 435	Extension for reply within third month	
118 1,360	218 680	Extension for reply within fourth month	
128 1,850	228 925	Extension for reply within fifth month	
119 300	219 150	Notice of Appeal	
120 300	220 150	Filing a brief in support of an appeal	
121 260	221 130	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,210	241 605	Petition to revive - unintentional	
142 1,210	242 605	Utility issue fee (or reissue)	
143 430	243 215	Design issue fee	
144 580	244 290	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
126 240	126 240	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 690	246 345	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 690	249 345	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ )

## SUBMITTED BY

Name (Print/Type) Frank Chau

Signature

Registration No. (Attorney/Agent)

34,136

## Complete (if applicable)

Telephone (516) 357-0091

Date 4/3/00

## WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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